

Sponsor Agreement

CONTACT INFORMATION	
Sponsee Name:	Sponsor Name:
Phone:	Phone:
Email:	Email:
Address: <hr style="border: 0; border-top: 1px solid black; margin-top: 5px;"/>	Address: <hr style="border: 0; border-top: 1px solid black; margin-top: 5px;"/>

What Sponsee will do:

- Work the 8 Recovery Principles and 12 Steps by attending a Celebrate Recovery Step Study Group and a weekly CR Open Share Group
- _____
- _____
- _____

Together we have committed to the following:

- Working the 8 Recovery Principles and 12 Steps
- Anonymity and Confidentiality
- Rigorous Honesty
- Continued Growth

Method of communication (phone/email and scheduled meetings (frequency/length):

How we will end the relationship if either party chooses (closure clause):

Additional commitments, boundaries, or comments:

Emergency Contact

Name: _____

Phone: _____

History:

(Discuss what events or people were significant in your life that may have contributed to your issues,)

Things that may trigger problems or a relapse:

What do you consider your chances of successful recovery?